LEO DROZDOFF

Acting Director

Department of Conservation and Natural Resources

JAMES R. LAWRENCE Administrator JIM GIBBONS Governor



State Land Office State Land Use Planning Agency Nevada Tahoe Resource Team Conservation Bond Program – Q1

Address Reply to

Division of State Lands 901 S. Stewart St, Suite 5003 Carson City, Nevada 89701-5246 Phone (775) 684-2720 Fax (775) 684-2721 Web www.lands.nv.gov

STATE OF NEVADA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

Division of State Lands

INSTRUCTIONS AND CHECKLIST FOR STATE OWNED LANDS APPLICATION

REQUIRED APPLICATION FEES			
NEW APPLICATIONS	AMENDMENTS *		
\$200 Commercial Uses	\$100 Commercial Uses		
\$150 Agricultural Uses	\$75 Agricultural Uses		
\$100 All Other Uses	\$50 All Other Uses		
Notes: 1. The required application fee i	is for filing purposes only.		
2. * Includes amendments to:	 Pending Applications 		
	 Existing authorized uses 		

Per NRS 322.110, the State Land Registrar shall charge a nonrefundable fee for the consideration of an application for the issuance of any lease, easement, permit, license or other authorization. The application fee must accompany the application in order to be processed.

Per NRS 322.100, the Division must charge a fee for the issuance of a Permit, License, or other Authorization in such an amount as the State Land Registrar determines to be reasonable based upon the fair market value of the use.

Per NRS 322.060, the Division must charge a fee for issuance of a lease or easement based upon the fair market value of the land

Upon determination that a project may be approved the Division will issue the appropriate authorization (e.g. easement, permit, license, etc.) on a form prepared by the attorney general's office. The authorization will contain necessary terms and conditions such as insurance requirements that must be agreed to by the applicant in writing before the project may proceed.

Applicants may contact the Division of State Lands prior to application submittal for clarification of application procedures. Application must be complete, including necessary attachments, in order to be considered for processing.

Required Attachments and Formats:

- Applications for easements, leases and some other documents must have a complete surveyed legal description, wet-stamped and signed by a surveyor licensed in Nevada, and a map stamped and signed by the surveyor.
- Metes and bounds descriptions must contain the name & address of the person who prepared the description per NRS 111.312 (4). These must be in a format capable of being attached as an exhibit to a legal document and accepted by the county recorder. (See NRS 247.110 and NRS 111.312.) No color on exhibit documents, one-inch margins around all documents, no type smaller than 9 point, 8½ x 11 format preferred.
- Do not mark the maps "exhibit." The project name must appear on the legal description and the maps.
- Please attach copies of any application filed with or permits received from any other agency.
- You may be asked to provide a current appraisal or market data for the property.
- Please consult this office if you intend to submit plans that are larger than $8 \frac{1}{2} \times 14$.
- You may be asked to provide additional information or copies.
- The completed application packet must contain one original set of signed supporting documents and full-sized maps.
- Submit ONE original along with SEVEN <u>copies</u> of the application with the supporting maps on 8 1/2 x 11 paper. These copies must be attached and ready to send out for review and comment. Please provide one additional copy for each abutting property owner.
- The non-refundable application fee must be received with the application packet per NRS 322.110.

Application Form:

For assistance with completing the application, refer to the checklist and instructions below as numbered accordingly to the items on the application.

Instructions:

- 1. **Application Number:** Leave blank. For Division of State Lands use only.
- 2. **Date:** Enter Current Date.

- 3. Name of Applicant: Complete the name of applicant exactly as you wish it to appear on the legal document to be issued by State Lands. This will be the "Grantee".
- 4. Contact Information: Please include a project contact person's name and information including mailing address, phone number, fax, email address and two business cards, if available. We need the name and title of the person who will be signing the document on behalf of the grantee. *In the case* of an agent acting on behalf of an owner, corporation or other business entity; please include a copy of the corporate resolution or other document giving that person the authority to sign on behalf of the organization. The person signing must have the authority to bind the grantee to the indemnity and liability requirements.
- 5. **Project Location:** A current Assessor's Parcel Number must be entered, along with the physical (street) address of the parcel. The Public Land Survey System (PLSS) description is also required. (i.e. NWSW Section 6, Township 30 North, Range 35 East) Note: A copy of the current assessor's parcel map and a project location map must be included with the application packet.

Subdivision:	NW NW
Section:	6
Township:	14 North
Range:	18 East

- 6. **Project Summary:** In the space provided, please write a short narrative summary of the project describing the location, intended use, any structure or improvements, and any disturbance including removal or fill of material. Discuss the impacts of your proposal and actions to mitigate negative impacts. Please provide the official name of the project that you wish us to assign to the file. Provide an original engineered site plan which must be accurate, to scale and show appropriate detail. Attach any additional supporting documentation as needed. Submit SEVEN (7) copies of the narrative and drawings, in addition to one copy for each of the adjacent or interested property owners as listed in Item #7 on the application.
- 7. **Notifications:** This is to enable the Division of State Lands to send a request for review and comment to all abutting property owners. Please give complete names and mailing addresses for the following:
 - a. Owners of adjacent or abutting parcels and Assessor's parcel numbers.
 - b. Governmental bodies. Local governmental jurisdiction.
 - c. Additional notification may be required on a case by case basis.
- 8. Proposed Start and Completion Dates: Enter the date for which the final state land document is requested and the proposed project completion date. All applications are sent out for a mandatory 30 day review and comment period to other state agencies. Allow a minimum of 120 days for processing permits and authorizations. Allow a minimum of 6 months for processing leases and easements.

(Leases must be approved by the Board of Examiners & the Interim Finance Committee, a minimal 90 day process.)

- 9. **Project Completion**. Specify if any portion of this project for which authorization is being sought has been completed. (installed, constructed).
- 10. **Additional Authorizations**. Specify and submit all authorizations which may have been issued for this project by any agency, including but not limited to, federal, state, local governing entities.
- 11. **Denial of Project**. Specify if this project or any portion thereof has been denied by any agency.
- 12. Additional Remarks: Use additional sheets, if needed.

14. Applicant name and signature.

13. **Recreational Purposes Disclaimer:** Indicate whether this application is for Recreational Use. A recreational purpose may include, but is not limited to private piers, boat ramps, mooring buoys, boat houses, swim floats or recreational dredging. NRS 322.1003 requires that the child support declaration on Page 4 must be filled out and signed only if the application is made by an individual for a recreational use.

DOCUN	MENTATION CHECKLIST
	Application Form
	Recreational Purposes Declaratory Statement
	Application Fee
	Owner Authorization (if agent acting in behalf of another party.)
	Assessor's Parcel Map and Project Location Map
	Original Signed Survey Map, if required.
	$8 \frac{1}{2} \times 11$ copies of signed application with supporting maps. (Minimum of 7 sets for agency use, with one additional set for <u>each</u> adjacent property owner.)
	Copies of approvals or permits from other interested agencies.

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AMENDMENTS*

\$100 Commercial Uses

\$75 Agricultural Uses

STATE OF NEVADA DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES

Division of State Lands

APPLICATION FOR AUTHORIZATION TO USE STATE OWNED LANDS

REQUIRED APPLICATION FEES

NEW APPLICATIONS

\$200 Commercial Uses

\$150 Agricultural Uses

		Il Other Uses	_	l Other Uses	
	Notes: 1. The required application fee is for filing purposes only. 2. * Includes amendments to: • Pending Applications				
	Existing authorized uses				
	Application Number:				
1.	(Assigned by Division)	2.	. Date:		
3.	Name of Applicant:				
4.	Contact Information:				
	Name:				
	Mailing Address:				
	Telephone Number:				
	Fax Number:				
	Email Address:				
5.	Location of proposed	use:			
	Assessor's				
	Parcel Number:	1	PLSS Location:	Subdivision:	
	Physical Address:			Section:	
	City:			Township:	
	County:			Range:	

6.	Project Summary:
	Provide a brief summary of the proposed use in narrative and on drawing, including the location,
	intended use, any structures or improvements, and any disturbance including removal or fill of
	material. Submit SEVEN (7) copies of the narrative and drawings on 8 ½" x 11" paper in
	addition to one copy for each of the adjacent or interested property owners listed in Item #7
	below. Drawings should be accurate, to scale and show appropriate detail. (Note: for leases and
	easements, accurate legal descriptions are required).
Use a	dditional sheets, if necessary.
7.	Names and Addresses for Notifications:
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8.	Proposed Start Date:
	Proposed Completion Date:
9.	Has any portion of the project for which authorization is sought been completed?
7.	
	If "yes", explain in remarks below.

10.	List and submit copies of authorizations issued by any agencies, including but not limited to, federal, state, local, governing entities that have approved of the project.	
11.	Has any agency denied approval for the activity or any portion thereof described herein?	
	If "yes", explain in remarks below.	
12.	Additional Remarks:	
13.	Is this application for a recreational purpose?	
	Yes (If "Yes," attach required statement as described below)	
	No	
	Pursuant to NRS 322.1003, an applicant for a permit, license or other authorization to use state land or state facilities for	
	a recreational purpose shall, if the permit, license or other authorization does not expire less than six (6) months after it	
	is issued, submit to the State Land Registrar the statement prescribed by the Welfare Division of the Department of Human Resources pursuant to NRS 425.520. The statement must be completed and signed by the applicant. The	
	statement must be attached to this application	
14.	Application is hereby made for a permit or permits to authorize the activities described herein. I	
	certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete and accurate. I further certify that I	
	possess the authority to undertake the proposed activity.	
	personal and annual and property are a second and a second a second and a second an	
	Name of Applicant (Print) Signature of Applicant	

DECLARATORY STATEMENT BY APPLICANT FOR A DIVISION OF STATE LAND'S PERMIT, LICENSE OR OTHER AUTHORIZATION TO USE STATE LAND FOR A RECREATIONAL PURPOSE PURSUANT TO NRS 322.1003 AND NRS 425.520

Please mar	k the appropriate response:		
	I am not subject to a court order for the support of a child		
	I am subject to a court order for the support of one or more children and am in compliance with the order or am in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owned pursuant to the order, or		
	I am subject to a court order for the support of one or more children and am <u>not</u> in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.		
	Failure to mark one (1) of the th	ree (3) will result in denial of the application.	
Name of A	pplicant (print)	Signature of Applicant	
Applicant Social Security Number:		Date	